

Exhibit A-9

SECTION G - BOOK VALUE UI

15

Book Value Benefit Payments Yes NoIf Yes, what percentage of plan assets will be invested in the Contract for which this application is being made? %

SECTION H - FINANCIAL REPORTS

Reporting Year End - Last day of the reporting year

Day Month
31 12

(Financial reports pertaining to the Contract issued will be prepared based on this date.)

Plan Year End

Day Month
31 12

SECTION I - CHARGES

Asset Charges

- Billed quarterly. If charges remain unpaid after 45 days, charges will be deducted proportionately from all accounts.
- Deducted proportionately from all accounts on the last day of each reporting quarter.
- Deducted from the last contribution to guaranteed interest account on the last day of each reporting quarter.

Contract Charges

- Not applicable
- Deducted from contribution

Withdrawal Charge A withdrawal charge will be applied to certain withdrawals for a minimum period of 6 Contract years.

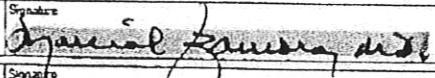
SECTION J - INCOME TAX WITHHOLDING

Distributions from this Contract prior to Contract termination are to be made payable to:

- Trustees as a standard product feature. The Plan Administrator is responsible for calculating and/or withholding federal and/or state income tax.
- Participants/Beneficiaries at an additional cost to the Contractholder. If elected, the Company is responsible for calculating and/or withholding federal and/or state income tax where applicable only if sufficient information is provided by the Contractholder to allow us to carry out these responsibilities.

SECTION K - AUTHORIZATION

The Applicant authorizes the Company to accept written financial and administrative direction from the persons specified below. The Applicant also authorizes the Company to provide Plan information to the persons specified below.

| | | | |
|--------------------|--------|---------|--------------------------------------------------------------------------------------|
| Print Name - First | Last | Title | Signature |
| Maricel | Zamora | Trustee |  |
| Print Name - First | Last | Title | Signature |
| | | |  |

SECTION L - APPLICANT'S STATEMENT

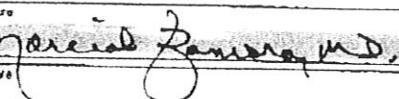
I, the Applicant, apply for the Ultraflex Group Annuity Contract and agree to accept the terms and conditions of the Contract. I understand that the Company is responsible for providing only the services set forth under this Contract. I also understand that the Company is not responsible for providing any other services in connection with the Plan and that no person or firm is authorized to act as an agent of the Company in providing such services.

I agree to furnish the Company with any Plan information or documents that the Company may require in order to provide the services set forth under the Contract. I certify that the Plan is qualified under Section 401(a) of the Internal Revenue Code.

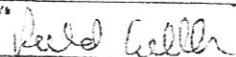
Signed at

| | | | |
|---------|-------|-----|-----------|
| City | State | On | Year |
| McAllen | TX | Day | Month |
| | | 12 | September |
| | | | 2005 |

On Behalf of Contractholder by

| | | | |
|--------------------|--------|---------|--------------------------------------------------------------------------------------|
| Print Name - First | Last | Title | Signature |
| Maricel | Zamora | Trustee |  |
| Print Name - First | Last | Title | Signature |
| | | Trustee |  |

Witness

| | | | |
|--------------------|--------|-------|--------------------------------------------------------------------------------------|
| Print Name - First | Last | Title | Signature |
| Robert | Cutter | |  |